Complete Summary

GUIDELINE TITLE

Role of pediatricians in advocating life support training courses for parents and the public.

BIBLIOGRAPHIC SOURCE(S)

Knapp JF, Pyles LA. Role of pediatricians in advocating life support training courses for parents and the public. Pediatrics 2004 Dec; 114(6): 1676. [50 references] PubMed

GUIDELINE STATUS

This is the current release of the guideline.

American Academy of Pediatrics (AAP) Policies are reviewed every 3 years by the authoring body, at which time a recommendation is made that the policy be retired, revised, or reaffirmed without change. Until the Board of Directors approves a revision or reaffirmation, or retires a statement, the current policy remains in effect.

COMPLETE SUMMARY CONTENT

SCOPE

METHODOLOGY - including Rating Scheme and Cost Analysis RECOMMENDATIONS

EVIDENCE SUPPORTING THE RECOMMENDATIONS

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

IMPLEMENTATION OF THE GUIDELINE

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT **CATEGORIES**

IDENTIFYING INFORMATION AND AVAILABILITY **DISCLAIMER**

SCOPE

DISEASE/CONDITION(S)

Conditions requiring life support

GUIDELINE CATEGORY

Prevention

CLINICAL SPECIALTY

Emergency Medicine Family Practice Pediatrics Preventive Medicine

INTENDED USERS

Advanced Practice Nurses Health Care Providers Nurses Physician Assistants Physicians

GUIDELINE OBJECTIVE(S)

To provide recommendations for pediatricians in advocating life support training courses for patients and the public

TARGET POPULATION

Parents, the public, and health care professionals, especially those caring for children

INTERVENTIONS AND PRACTICES CONSIDERED

Patient/parent education regarding life support training

MAJOR OUTCOMES CONSIDERED

Survival

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Not stated

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus (Committee)

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Systematic Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

Not stated

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

- 1. Pediatricians should promote parental education in pediatric basic life support. Families of children with special health care needs, neonatal intensive care unit graduates, children who have ready access to water, or children who are active in water sports should be especially encouraged to undergo training and should be assisted in obtaining access to the training.
- 2. Pediatricians should encourage and collaborate with parents to promote basic life support training for adolescents, parents, caregivers, school personnel, youth leaders, and coaches to build the "chain of survival" in the community.
- 3. Basic life support training for the aforementioned groups should be advocated in policy advisory discussions at all governmental levels with a goal of making the training readily available and affordable.
- 4. Pediatricians and pediatric subspecialty providers should lead by example by taking and teaching basic life support training courses.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of supporting evidence is not specifically stated for each recommendation.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

Immediate bystander cardiopulmonary resuscitation for victims of cardiac arrest improves survival for out-of-hospital cardiac arrest. Pediatricians will improve the chance of survival of children and adults who experience cardiac arrest by advocating for cardiopulmonary resuscitation training and participating in basic life support training courses as participants and instructors.

POTENTIAL HARMS

Not stated

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

Knapp JF, Pyles LA. Role of pediatricians in advocating life support training courses for parents and the public. Pediatrics 2004 Dec; 114(6):1676. [50 references] PubMed

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2004 Dec

GUIDELINE DEVELOPER(S)

American Academy of Pediatrics - Medical Specialty Society

SOURCE(S) OF FUNDING

American Academy of Pediatrics

GUIDELINE COMMITTEE

Committee on Pediatric Emergency Medicine

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Committee on Pediatric Emergency Medicine, 2002-2003: *Jane F. Knapp, MD, Chairperson; Thomas Bojko, MD; Margaret A. Dolan, MD; Ronald A. Furnival, MD; Steven E. Krug, MD; Deborah Mulligan-Smith, MD; Richard M. Ruddy, MD; Kathy N. Shaw, MD, MSCE

*Lee A. Pyles, MD, Past Committee Member

Liaisons: Jane Ball, RN, DrPH, EMSC National Resource Center; Kathleen Brown, MD, National Association of EMS Physicians; Dan Kavanaugh, MSW, Maternal and Child Health Bureau; Sharon E. Mace, MD, American College of Emergency Physicians; David W. Tuggle, MD, American College of Surgeons

Staff: Susan Tellez

* Lead authors

FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

GUIDELINE STATUS

This is the current release of the guideline.

American Academy of Pediatrics (AAP) Policies are reviewed every 3 years by the authoring body, at which time a recommendation is made that the policy be retired, revised, or reaffirmed without change. Until the Board of Directors approves a revision or reaffirmation, or retires a statement, the current policy remains in effect.

GUIDELINE AVAILABILITY

Electronic copies: Available from the <u>American Academy of Pediatrics (AAP) Policy Web site</u>.

Print copies: Available from American Academy of Pediatrics, 141 Northwest Point Blvd., P.O. Box 927, Elk Grove Village, IL 60009-0927.

AVAILABILITY OF COMPANION DOCUMENTS

The following is available:

• Role of pediatricians in advocating life support training courses for parents and the public. Pediatrics. 2004 Dec; 114(6):e761-5.

Electronic copies: Available from the <u>American Academy of Pediatrics (AAP) Policy Web site</u>.

PATIENT RESOURCES

None available

NGC STATUS

This NGC summary was completed by ECRI on February 4, 2005. The information was verified by the guideline developer on March 15, 2005.

COPYRIGHT STATEMENT

This NGC summary is based on the original guideline, which is subject to the guideline developer's copyright restrictions. Please contact the Permissions Editor, American Academy of Pediatrics (AAP), 141 Northwest Point Blvd, Elk Grove Village, IL 60007.

DISCLAIMER

NGC DISCLAIMER

The National Guideline Clearinghouse[™] (NGC) does not develop, produce, approve, or endorse the guidelines represented on this site.

All guidelines summarized by NGC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public

or private organizations, other government agencies, health care organizations or plans, and similar entities.

Guidelines represented on the NGC Web site are submitted by guideline developers, and are screened solely to determine that they meet the NGC Inclusion Criteria which may be found at http://www.guideline.gov/about/inclusion.aspx.

NGC, AHRQ, and its contractor ECRI make no warranties concerning the content or clinical efficacy or effectiveness of the clinical practice guidelines and related materials represented on this site. Moreover, the views and opinions of developers or authors of guidelines represented on this site do not necessarily state or reflect those of NGC, AHRQ, or its contractor ECRI, and inclusion or hosting of guidelines in NGC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding guideline content are directed to contact the guideline developer.

© 1998-2006 National Guideline Clearinghouse

Date Modified: 10/2/2006